



## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

STEPHEN MCCOLLUM, et al.,	§	
Plaintiffs,	<b>§</b>	
	§	
v.	§	<b>CIVIL NO. 4:14-CV-3253</b>
	§	
	<b>§</b>	
BRAD LIVINGSTON, et al.,	§	
Defendants.	<b>§</b>	
-	8	

## Exhibit 46

THE STATE OF TEXAS

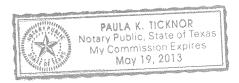
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COUNTY OF WALKER

BEFORE ME, the undersigned authority, personally appeared **Devoriah Nauls**, who, being by me duly sworn, deposed as follows:

"My name is **Devoriah Nauls**, and I am over the age of eighteen (18), of sound mind, competent and capable of making this affidavit, and personally acquainted with the facts herein stated:

I am the Correctional Clinical Associate at The University of Texas Medical Branch - Correctional Managed Care, Health Services Archives and my office is located in Huntsville, Texas. In this capacity, I am the individual who can authenticate and certify as official, copies of medical records at the TDCJ Health Services Archives. Attached hereto are 343 pages of records, time period July 1, 2002 to January 15, 2004 and July 15, 2011 to July 28, 2011 from the medical records of Larry G. McCollum, TDCJ # 1721640. These said records are kept in the regular course of business by an employee or representative of UTMB-Correctional Managed with knowledge of the act, event, condition, opinion or diagnosis, recorded or to transmit information thereof to be included in such record; and the record was made at or near the time or reasonably soon thereafter. The records attached hereto are the original or exact duplicates of the original medical records maintained by TDCJ Health Services Archives".



**Devoriah Nauls** 

### جي

# TEXAS DEPARTMENT OF CRIMINAL JUSTICE MENTAL HEALTH SERVICES

# SKYVIEW PSYCHIATRIC FACILITY PSYCHIATRIC EVALUATION

OFFENDER NAME: McCOLLUM, LARRY GENE TDCJ#: 1105538

#### **IDENTIFYING DATA:**

DOB: 04-04-53

DATE OF ADMISSION: 12-01-03 AGE/RACE: 50 y/o White male.

EXAMINER: B. Meharry, MSN, RN, CS, PMH-NP.

**DATE OF EXAMINATION: 12-03-03/1400.** 

#### REASON FOR ADMISSION:

The patient was referred here from the Cole Unit by Mr. Dorsett, LBSW secondary to, "Patient was waiting on ride to go to Daddy's funeral, decreased hygiene, and disorientation." He was referred from Skyview Crisis Management into D&E with an AXIS I Diagnosis of R/O Dementia of the Alzheimer's Type, Uncomplicated, and on the following psychoactive medication: Fluoxetine 20 mg. p.o. q. h.s., Cogentin 2 mg. p.o. q. h.s., and Benadryl 25 mg. p.o. q. h.s. The patient was advised of the purpose of this examination, the limits of confidentiality, and informed consent. He verbalized understanding and agreed to participate.

#### **CHIEF COMPLAINTS:**

"I was getting confused about a few things, like, I didn't know what date it was."

#### PAST PERTINENT PSYCHIATRIC HISTORY:

The patient did not begin receiving any freeworld psychiatric treatment until 2001, when he first encountered his legal difficulties. He was treated with Zoloft for symptoms of depression at the MHMR center in Waco, Texas. There is no freeworld history of suicidal attempts/gestures, self-injurious behaviors, or anger-management problems. His substance abuse history included the use of alcohol, methamphetamines, and cocaine. With no known history of treatment for his substance abuse. There is no known familial history of mental illness or chemical dependency. There is no history of a juvenile record. While at the McClendon County Jail awaiting transfer to TDCJ-ID, he was diagnosed with Depression and was treated with Zoloft 100 mg. p.o. q. am.

This is the first incarceration for this patient who was received at TDCJ-ID on 07-01-02, where he is serving a 20month sentence for Theft, Over \$1500. Upon receipt to the prison system, he told the Responsible Psychologist that he had been having difficulty coping with the death of his brother, who died five years ago and the death of his father, who died April of 2003. He became depressed and spent \$12,000. on various items and gambling. This led to his arrest and conviction. He also acknowledged that he had a problems with gambling, sex, and alcohol. He stated that his drinking escalated in 1983, following a divorce. He admits to three arrests for DWI. Although he has never been to Rehab, he relates that he entered a "Detox" center for 10 days in 1987. He also relates that he had some "minor" involvement with Alcoholic Anonymous. At the time, he also reported that he considered himself to be very co-dependent, expressed concern about his welfare upon release from prison as he has no place to live, was worried about the future, and had problems keeping his mind off things that depress him. Although he denied any current suicidal ideations or intent, he admitted that he sometimes believed that he had no real purpose for living. He often felt hopeless and lacked motivation, reported fluctuating appetite, erratic sleep pattern and a recent 30 lbs weight loss. There was no evidence of psychotic symptoms. On 07-02-02, he was seen by the attending psychiatrist where he received an AXIS I Diagnosis of Major Depressive Disorder, Recurrent. He was placed on Zoloft 100 mg. p.o. q. am. A few months later it was noted that he was doing well on Zoloft and wanted to continue his medication regimen. He was 100 percent compliant. He also related that he was experiencing feeling "jumpy". On 12-11-02, he was seen by another psychiatrist, where he reported not only a history of depression, but problems with anxiety. His AXIS I Diagnosis remained Major Depression. He was switched to Nortriptyline 25 mg. p.o. q. h.s. Several days later, he complained of still experiencing "jumpy legs" at bedtime. His Nortriptyline was increased to 50 mg. p.o. q. h.s. On 01-08-03, he complained that he was unable to sleep. His Nortriptyline was increased to 75 mg. p.o.

Page 1 of 3

**SCANNED** 

# TEXAS DEPARTMENT OF CRIMINAL JUSTICE MENTAL HEALTH SERVICES

# SKYVIEW PSYCHIATRIC FACILITY PSYCHIATRIC EVALUATION

OFFENDER NAME: McCOLLUM, LARRY GENE

TDCJ#: 1105538

q. h.s. Shortly thereafter, he was referred to Skyview Crisis Management secondary to, threatening suicide. He was discharged back to his unit of assignment, with no change in his diagnosis or medication regimen. He continued to complain of feeling depressed, so his Nortriptyline was increased to 100 mg. p.o. q. h.s. On 04-15-03, he presented as decompensating. He was easily irritated and exhibited poor hygiene and disorganized thoughts. He continued to complain of feeling anxious. He was diagnosed with Anxiety Disorder, NOS and Depressive Disorder, Due To Alcohol and Drugs. He was placed on Haldol 10 mg. p.o. b.i.d., Benadryl 25 mg. p.o. b.i.d., and Prozac 20 mg. p.o. q. am.

More recently, on 09-17-03, he was seen by yet another attending psychiatrist, where he received an AXIS I Diagnosis of Major Depression With Psychotic Features. He continued on the same medication regimen of: Haldol 5 mg. p.o. q. h.s., Benadryl 25 mg. p.o. q. h.s., and Prozac 20 mg. p.o. q. h.s. On 11-24-03, he was seen by the MHS at cellside. He seemed disoriented, was difficult to understand, and related that he was waiting for a ride to go to his Dad's funeral. He was disheveled and exhibited poor hygiene. After consulting with Dr. Reddy, it was determined that he should be referred to Skyview Crisis Management for evaluation and determination of his treatment needs. Upon receipt to the Skyview Unit, he told the admitting RN that he was feeling depressed because a male voice was telling him to hurt himself or others. Objectively, he was observed to be alert, spontaneous, and although he was oriented in general, he was unaware that the day before had been the holiday (Thanksgiving). He seemed "somewhat" confused. Currently, he reports difficulty sleeping, but appetite is "good." He described his mood as "good." He denied any current suicidal ideations or intent. He voiced no complaints regarding side effects from his current medication regimen, but he did complain of difficulty sleeping, blurred vision, and difficulty starting to urinate.

#### PERTINENT MEDICAL HISTORY:

The patient has a history of chronic lower back pain. He has no known drug allergies. There is no known past history of head trauma, loss of consciousness, seizures, blackouts, or chronic headaches.

#### PERTINENT PHYSICAL FINDINGS:

VITAL SIGNS: TEMP: 98; PULSE: 130; RESP: 20; BP: 184/88.

HT: 70 in. WT: 218 lbs.

#### **LABORATORY INDICES/X-RAYS/OTHER PERTINENT DIAGNOSTIC STUDIES:**

CHEM 12 of 07-08-02 showed decreased glucose and elevated uric acid, decreased albumin; liver function test of 07-08-02 was within normal limits; lipid panel of 07-08-02 showed increased triglycerides, decreased HDL cholesterol and increased VLDL cholesterol; CBC with differential and platelet count of 07-08-02 showed deceased RBCs; TSH of 07-08-02 was within normal limits; T4 of 07-08-02 was decreased; T3 of 07-08-02 was within normal limits; FREE thyroxin index of 07-08-02 was decreased; PSA of 07-08-02 was within normal limits; Helicobacter pylori, IgG of 07-08-02 was positive; HIV-1-ABS of 07-02-02 was nonreactive; RPR of 07-02-02 was nonreactive.

There are no chest x-rays. X-ray of lumbar spine of 12-16-02 was within normal limits; x-ray of right knee of 12-16-02 showed some arthritic changes; x-ray of left knee of 12-16-02 showed minimal early articular marginal spurring; EKG of 07-02-03 showed normal sinus rhythm and was considered a normal EKG.

GENERAL DESCRIPTION: Well-developed, well-nourished, overweight, White male in no obvious acute physical distress. A complete physical examination was not performed at this time, due to the locked down status of the facility. A cursory visual examination revealed the following:

HEENT: EYES: no nystagmus; NOSE: no drainage.

SKIN: Nonicteric. Appears to be grossly intact.

EXTREMITIES: No cyanosis, clubbing or edema.

NEUROLOGICAL EXAMINATION: Cranial nerves II through XII appear to be grossly intact. SENSORY: grossly intact. MOTOR: good ROM in all extremities. CEREBELLAR: Steady gait with no ataxia. AIMS: negative.

ASSESSMENT: Possible Abnormal Laboratory Indices, Abnormal Cardiac Panel, and Elevated Systolic Pressure.

Page 2 of 3

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### TEXAS DEPARTMENT OF CRIMINAL JUSTICE MENTAL HEALTH SERVICES

### SKYVIEW PSYCHIATRIC FACILITY **PSYCHIATRIC EVALUATION**

OFFENDER NAME: McCOLLUM, LARRY GENE

TDCJ#: 1105538

## MENTAL STATUS EXAMINATION:

The patient was seen at cellside, due to the locked down status of the facility. He was dressed in a prison attire and was unshaven, but adequately clean. He appeared older than his stated age. He was alert, made good eye contact, and was cooperative. Psychomotor activity was calm. Speech was spontaneous, rate was within normal limits. Mood was appropriate to the situation. Affect was congruent with mood, range was reactive. No hallucinations were elicited at this time. Thought content was negative for suicidal or homicidal ideations or intent. He expressed no delusions and unusual thinking. Thought processes were coherent, logical, and goal-directed. Patient is grossly oriented X4. His remote and recent memory is grossly intact. His attention and concentration is intact. His intelligence is estimated to be in the average range. Insight and judgement are good.

#### SUMMARY OF FINDINGS:

This patient presents with no prior psychiatric history, until he encountered his legal difficulties and went through the stressors of losing some family members. There is also a history of excessive alcohol use. Currently, there are no abnormalities in cognition, thought content, thought processes, nor evidence of hallucinations. There is no major mood disturbance. I believe that his sleep disturbance is most likely due to the schedule that he is receiving Prozac. It may be too activating for him to receive it at night. Although he has no history of hypertension, his cardiac panel was significantly abnormal and there is a familial history of hypertension and diabetes. Given this patient's age and family history, it is possible that he may have experienced a transient ischemia attack (TIA). This would certainly need to be ruled out. At this time, I see no evidence of suicidal ideations or intent, nor is there a recent past history to indicate that he would be at high risk for engaging in self-injurious behaviors.

## **DSM-IV DIAGNOSIS:**

AXIS: I: 311. Depressive Disorder, NOS. R/O Mental Disorder, NOS, Due to Possible Cardiovascular Problems. 293.9 AXIS H: Deferred. AXIS Chronic Low-Back Pain; R/O Cardiovascular Problems. NKDA. III: AXIS Problems related to interaction with the legal system: incarceration. IV: Problems due to primary support group: recent death of a family member. AXIS V: GAF: 55.

## RECOMMENDATIONS/INTERVENTIONS:

Prozac 20 mg. p.o. q. am and Trazodone 100 mg. p.o. q. pm X14 days, then D/C. Discontinue Cogentin and Educated patient regarding side effects, risks, and possible benefits with the use of Prozac and Trazodone. Patient consents and agrees with the treatment plan. I believe that this patient could benefit from the programming in the Mood Disorder Treatment Track to help him learn some coping skills, in order to better plan his

PROGNOSIS: Uncertain at this time.

SIGNATURE/DATE:

N RN CRIPMH-NP/Date 0745 B. Meharry, MSN, RN, CS/PMH-NP/Date

Transcribed: 12-04-03/14/12/mlr

Page 3 of 3

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JSA8830 /CLM1/HS09

# TEXAS BEPARTMENT OF CRIMINAL JUSTICE HEALTH SUMMARY FOR CLASSIFICATION

09:53: 01/09/20

NAME: MCCOLLUM,LARRY GENE TBCJ#: 01105538 STD#: 03950494	DOB: 04/04/1953 PULL HES WGT: 290 LBS
UNIT: B HOUSING: K1-006	HGT: 0'00" !3!1!2!1!1!3!
JOB: JC UTILITY WORK SQUAD 05	IEIAIBIAIAINI
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B. REGIONAL MEDICAL FACILITY	_ F. SINGLE LEVEL FACILITY
C. EXTENDED CARE FACILITY	SUITABLE FOR TRUSTEE CAMP ASSIGNMENT?X YES_
00 B. PSYCHIATRIC CARE FACILITY	SUITABLE FOR SAIP FACILITY? X YES
II. HOUSING ASSIGNMENT	
A. BASIC HOUSING (CHECK ONE)	B. BUNK ASSIGNMENT (CHECK ONE)
X 1. NO RESTRICTION	X 1. NO RESTRICTION
2. SINGLE CELL ONLY	2. LOWER ONLY
3. DOUBLE CELL ONLY	
4. SPECIAL HOUSING (HOUSING WITH	
PATIENT WITH LIKE MEDICAL CONDITION	
5. CELL BLOCK ONLY	2. GROUND FLOOR ONLY
III.WORK ASSIGNMENT/RESTRICTIONS (CHECK ALL.	THAT APPI.Y)
1. HEDICALLY UNASSIGNED	15.NO FOOD SERVICE
2. PSYCHIATRICALLY HNASSIGNED	16.NO REPETITIVE USE OF HANDS
3. SEDENTARY WORK ONLY	17.NO WALKING ON WET UNEVEN SURFACES
4. FOUR HOUR WORK RESTRICTION	18.DO NOT ASSIGN TO MEDICAL
3: FOUR BOOK BIRLIED WORK RESTRICTION	
6. EXCUSE FROM SCHOOL	00 20.NO TEMPERATURE EXTREMES
7. LIMITED STANDING	00 21.NO HUMIDITY EXTREMES
8. NO WALKING > YARDS	22.NO EXPOSURE TO ENVIRONMENTAL POLLUTAR
9. NO LIFTING > LBS.	23.NO WORK WITH CHEMICALS OR IRRITANTS
10.NO BENDING AT WAIST	24.NO WORK REQUIRING SAFETY BOOTS
11.NO SQUATTING 12.NO CLIMBING	25. NO WORK AROUND MACHINES WITH MOVING P
13.LIMITED SITTING	26.NO WORK EXPOSURE TO LOUD NOISES
14.NO REACHING OVER SHOULDER	27.NO WORK REQUIRING COMPLEX INSTRUCTION
14.00 RENUBING DYER SHOULDER	
IV. DISCIPLINARY PROCESS (CHECK ONE)	
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B. MEDICAL REPRESENTATIVE REQUIRED	
T. TRANSPORTATION RESTRICTIONS (CHECK ONE)	
X A. NO RESTRICTION	C. WHEELCHAIR VAN
B. EMS AMBULANCE	D. VAN (SOUTHERN REGION ONLY)
S. REDDY, M.D. PSYCHIATRI 01/09/2004	•
PRINTED NAME AND TITLE OF REVIEWER DATE	SIGNATURE OF REVIEWER
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## Case 4:14-cv-03253 Document 288-28 Filed on 06/17/16 in TXSD Page 9 of 22

# Scanned by THOMPSON, MURVEL J in facility SKYVIEW on 12/24/2003 09:08 TEACH OF THE PROPERTY OF CANADITAL DOLLARS.

HEALTH SUMMARY FOR CLASSIFICATION

08:54:21 12/24/2003

NAME: MCCOLLUM, LARRY GENE TDCJ#: 0110553% SID#: 03950494 UNIT: SV HCUSING: 5A1-03 JOB: UNASGN MENTAL HEALTH		P U L H E S  [3 1 2 1 1 4; [E A B A A P  [P]  P     T
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## Case 4:14-cv-03253 Document 288-28 Filed on 06/17/16 in TXSD Page 10 of 22

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HSM-18 (REV.07/01)

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NAME: MCCOLLUM, LARRY GENE TDCJ#: 01105538 SID#: 03950494	DOB: 04/04/1953	PULHES
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MEHARRY RNNP 12/24/2003 PRINTED NAME AND TITLE OF REVIEWER DATE	SIGNATURE OF RE	EVIEWER

McCollum 05732





SAAABBO /CLM1/HSOS

4.7M-18(PEV.07/01)

## TEXAS DEPARTMENT OF CRIMINAL JUSTICE HEALTH SHMMARY FOR CLASSIFICATION

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APPENDIX 14 ( PRV . 67/61 )	17 N	/lcCollum 05733 🖰
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NAME: MCCOLLUM, LARRY GENE	DOB: 04/04/1953	
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HSM-18(REV.07/01)

## TEXAS DEPARTMENT OF CRIMINAL JUSTICE HEALTH SUMMARY FOR CLASSIFICATION

NAME: MCCOLLUM, LARRY GENE TDCJ#: 01105538 SID#: 03950494	DOB: 04/04/1953	
UNIT: CL. HOUSING: J1-016 JOB: JC UTILITY WORK SQUAD 05	WGT: 290 LBS HGT: 0'00"	1311121111131 1EIAIBIAIAINI 1PI !PI ! !T!
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2. PSYCHTATRICALLY UNASSIGNED		VE USE OF HANDS
3. SEDENTARY WORK ONLY		ON WET UNEVEN SURFACE:
4. FOUR HOUR WORK RESTRICTION	18.00 NOT ASST	
S. FOUR HOUR LIMITED WORK RESTRICTION		DIRECT SUNLIGHT
6. EXCUSE FROM SCHOOL	20.NO TEMPERAT	
7. LIMITED STANDING	21.NO HUMIDITY	
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46 9. NO LIFTING > 050 LBS.		H CHEMICALS OF IRRITAL
10.NO BENDING AT WAIST	24.NO WORK REQ	HIRING SAFETY BOOTS
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13.LIMITED SITTING 14.NO REACHING OVER SHOULDER	27.NO WORK REQ	UIRING COMPLEX INSTRUC
IV. DISCIPLINARY PROCESS (CHECK ONE)		
A. NO RESTRICTIONS		
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00 B. CONSULT REPRESENTATIVE OF MEDICAL DEPARTMENT.	TH DEPARTMENT BEFORE ARTMENT BEFORE TAKING	TAKING DISCIPLINARY A DISCIPLINARY ACTION
V. INDIVIDUALIZED TREATMENT PLAN (CHECK ALL T	THAT APPIVA	
X A. NO RESTRICTION	C. PSYCH REPRES	EFNTATIVE DEAUTOED
B. MEDICAL REPRESENTATIVE REQUIRED	Management - 5 - 5 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	troit i la traditi i i i i i i i i i i i i i i i i i i
VI. TRANSPORTATION RESTRICTIONS (CHECK ONE)		
X A. NO RESTRICTION	C. WHEELCHAIR	/AN
B. EMS AMBULANCE	D. VAN (SOUTHE	
BARRY RAFF,MD HEALTH AUT 03/14/2003		
PRINTED NAME AND TITLE OF REVIEWER DATE	SIGNATURE OF	REVIEWER
APPENDIX 1418	B McG	Collum 05734



HOUSING: J1-016



JSA8830 /CLM1/HS09

NAME: MCCOLLUM LARRY GENE

TDCJ#: 01105538 STD#: 03950494

JOB: JC UTILITY WORK SQUAD 05

I. UNIT OF ASSIGNMENT (CHECK ONE)

\_\_ C. EXTENDED CARE FACILITY

B. REGIONAL MEDICAL FACILITY

X A. NO RESTRICTION

#### TEXAS DEPARTMENT OF CRIMINAL JUSTICE HEALTH SUMMARY FOR CLASSIFICATION

DOB: 04/04/1953 PULHES WGT: 290 LBS HGT: 0'00" 13!1!2!1!1!3! TETAIBTATAIN! IPI IPI I ITI the time and the time and the last time and time and E. BARRIER-FREE FACTILITY \_\_ F. SINGLE LEVEL FACILITY SUITABLE FOR TRUSTEE CAMP ASSIGNMENT?X ACE POT. TTA S MOV ES TRII RY TON

52 4 1125 6 126 6 127 6 127 7 127 7 12 1 1 1 1 1 1 1 1 1 1 1 1	
D. PSYCHTATRIC CARE FACILITY	SHITABLE FOR SAIP FACILITY?
II. HOUSING ASSIGNMENT	
A. BASIC HOUSING (CHECK ONE)	B. BUNK ASSIGNMENT (CHECK ONE)
X 1. NO RESTRICTION	1. NO RESTRICTION
2. SINGLE CELL ONLY	60 2, LOWER ONLY
3. DOUBLE CELL ONLY	
4. SPECIAL HOUSING (HOUSING WITH	C. ROW ASSIGNMENT (CHECK ONE)
PATIENT WITH LIKE MEDICAL CONDITION	
S. CELL BLOCK ONLY	2. GROUND FLOOR ONLY
III.WORK ASSIGNMENT/RESTRICTIONS (CHECK ALL TI	HAT APPIY)
1. MEDICALLY UNASSIGNED	15.NO FOOD SERVICE
2. PSYCHIATRICALLY UNASSIGNED	16 NO REPETITIVE USE OF HANDS
3. SEDENTARY WORK ONLY	60 17. NO WALKING ON WET UNEVEN SURFA
A PAUD HAID HADE BECTTERS	18.DO NOT ASSIGN TO MEDICAL
C COUR HOUR CENTERS WORK OF CTRICTION	19.NO WORK IN DIRECT SUNLIGHT
6. EXCUSE FROM SCHOOL	20.NO TEMPERATURE EXTREMES
60 7. LIMITED STANDING	21.NO HUMIDITY EXTREMES
60 8. NO WALKING > 800 YARDS	22.NO EXPOSURE TO ENVIRONMENTAL F
60 9. NO LIFTING > 025 LBS.	23.NO WORK WITH CHEMICALS OR IRRI
10.NO BENDING AT WAIST	24.NO WORK REQUIRING SAFETY BOOTS
5 1 2375 (77) FR (FR) FR) FR	25.NO WORK AROUND MACHINES WITH M
60 12.NO CLIMBING	26.NO WORK EXPOSURE TO LOUD NOISE
13.LIMITED SITTING	27.NO WORK REQUIRING COMPLEX INST
14.NO REACHING OVER SHOULDER	77.107 TO B BIOQUI BI 140 SUBFRIDA (1921)
IV. DISCIPLINARY PROCESS (CHECK ONE)	
A. NO RESTRICTIONS	
B. CONSULT REPRESENTATIVE OF MENTAL HEAL	TH DEPARTMENT REPORE TAKING DISCIPLINAS
00 C. CONSULT REPRESENTATIVE OF MEDICAL DEP	
V. INDIVIDUALIZED TREATMENT PLAN (CHECK ALL	THAT APPLY)
X A. NO RESTRICTION	C. PSYCH REPRESENTATIVE REQUIRED
B. MEDICAL REPRESENTATIVE REQUIRED	-
VI. TRANSPORTATION RESTRICTIONS (CHECK ONE)	
X A. NO RESTRICTION	C. WHEELCHAIR VAN
B. EMS AMBULANCE	D. VAN (SOUTHERN REGION ONLY)
BARRY RAFF, M.D. HEALTH AUT 02/28/2003	
PRINTED NAME AND TITLE OF REVIEWER DATE	SIGNATURE OF REVIEWER
THE REPORT OF THE PERMENT AND A STATE OF THE PERMENT OF THE PERMEN	ा राज्यकाल के शास्त्रकार । ४७०° व्याप्ति के राज्यकार है। वर्ष
ADDENDIY 1/10	McCollum 05735

**APPENDIX 1419** 

McCollum 05735





JSA8830 /CLM1/HS09

TEXAS DEPARTMENT OF CRIMINAL JUSTICE HEALTH SUMMARY FOR CLASSIFICATION

07

NAME: MCCOLLUM,LARRY GENE TDCJ#: 01105538 STD#: 03950494	00B: 04/04/1953 F	UI.HES
UNIT: CL. HOUSING: X-11 JOB: JC TRANSIENT	न ! य !	11121111131 HAIBIAIAINI
I. UNIT OF ASSIGNMENT (CHECK ONE)		
X A. NO RESTRICTION	E. BARRIER-FREE FA	CILITY
B. REGIONAL MEDICAL FACILITY	F. SINGLE LEVEL FA	
C. EXTENDED CARE FACILITY	SUITABLE FOR TRUSTEE	
D. PSYCHIATRIC CARE FACILITY	SUITABLE FOR SAIP FAC	
II. HOUSING ASSIGNMENT		
A. BASIC HOUSING (CHECK ONE)	B. BUNK ASSIGNMENT (C	HECK ONE)
X 1. NO RESTRICTION	1. NO RESTRICTION	
2. SINGLE CELL ONLY	30 2. LOWER ONLY	
3. DOUBLE CELL ONLY		
4. SPECIAL HOUSING (HOUSING WITH	C. ROW ASSIGNMENT (CH	ECK ONE)
PATIENT WITH LIKE MEDICAL CONDITION	X 1. NO RESTRICTION	
5. CELL BLOCK ONLY	2. GROUND FLOOR ON	T, Y
III.WORK ASSIGNMENT/RESTRICTIONS (CHECK ALL T	THAT APPLY)	
1. MEDICALLY UNASSIGNED	15.NO FOOD SERVICE	
2. PSYCHIATRICALLY UNASSIGNED	16.NO REPETITIVE U	
3. SEDENTARY WORK ONLY	30 17. NO WALKING ON W	
4. FOUR HOUR WORK RESTRICTION	18.DO NOT ASSIGN T	
5. FOUR HOUR LIMITED WORK RESTRICTION	19.NO WORK IN DIRE	
6. EXCUSE FROM SCHOOL	30 20.NO TEMPERATURE	
30 7. LIMITED STANDING	00 21.NO HUMIDITY EXT	
30 8. NO WALKING > 800 YARDS	22.NO EXPOSURE TO	
30 9. NO LIFTING > 025 LBS.	23.NO WORK WITH CH	
10.NO BENDING AT WAIST	24 NO WORK REQUIRE	
11.NO SQUATTING 30 12.NO CLIMBING	25.NO WORK AROUND	
13.LIMITED SITTING	26.NO WORK EXPOSUR	
14.NO REACHING OVER SHOULDER	27.NO WORK REQUIRE	MG COMPLEX INSTRI
IV. DISCIPLINARY PROCESS (CHECK ONE)		
A. NO RESTRICTIONS		
B. CONSULT REPRESENTATIVE OF MENTAL HEAL	TH DEPARTMENT REFORE TAK	ING DISCIPLINARY
00 C. CONSULT REPRESENTATIVE OF MEDICAL DEF		
V. INDIVIDUALIZED TREATMENT PLAN (CHECK ALL	THAT APPLY)	
X A. NO RESTRICTION	C. PSYCH REPRESENT	ATIVE REQUIRED
B. MEDICAL REPRESENTATIVE REQUIRED		
VI. TRANSPORTATION RESTRICTIONS (CHECK ONE)		
X A. NO RESTRICTION	C. WHEELCHAIR VAN	
B. EMS AMBULANCE	n. VAN (SOUTHERN R	EGION ONLY)

**APPENDIX 1420** 

BILLY D. BURLESON PSYCH

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McCollum 05736

02/20/2003

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JSA8830 /CLM1/HS09



# TEXAS DEPARTMENT OF CR. NAL JUSTICE HEALTH SUMMARY FOR CLASSIFICATION

NAME: MCCOLLUM, LARRY GENE		
THCJ#: 01105538 STD#: 03950494 UNIT: CL HOUSING: 17-044	DOB: 04/04/1953 WGT: 290 LBS	PULHES
JOB: JC HTILITY WORK SQUAD 05	HGT: 0'00"	1311121111131 TETATBIATAINI TPI TPI T TTI
I. UNIT OF ASSIGNMENT (CHECK ONE)		and the same was the same and the same and the same
X A. NO RESTRICTION		
- B. REGIONAL MEDICAL FACILITY	E. BARRIER-FREI	E FACTITHY
C. EXTENDED CARE FACILITY	F. SINGLE LEVEL	. FACTITTY
D. PSYCHIATRIC CARE FACILITY	SUITABLE FOR TRUST SUITABLE FOR SAIP	EE CAMP ASSTONMENTS
II. HOUSING ASSIGNMENT		,
A. BASIC HOUSING (CHECK ONE)		
X 1. NO RESTRICTION	B. BUNK ASSIGNMENT	(CHECK ONE)
2. SINGLE CELL ONLY	'. NO RESTRICTI	ON CONTRACTOR OF THE CONTRACTO
3. DOUBLE CELL ONLY	30 2. LOWER ONLY	
- 4. SPECIAL HOUSING (HOUSING MITTER		
TO LEAT WITH LIKE MEDICAL COMPTENS	C. ROW ASSIGNMENT	CHECK ONE)
5. CELL BLOCK ONLY	^ '. NO RESTRICTION	N
	2. GROUND FLOOR	ONLY
ITT.WORK ASSIGNMENT/RESTRICTIONS (CHECK ALL T	3113.00	
- 2. PSYCHIATRICALLY UNASSIGNED	15.NO FOOD SERVI	CE
3. SEDENTARY WORK ONLY	16.NO REPETITIVE	USE OF HANDS
4. FOUR HOUR WORK RESTRICTION	" ' ' NU WALKING ON	WET HINFURN CHOCKE
D. FOUR HOUR LIMITED WORK RESTRICTION	'''-'''' WUT ASSIGN	TO MEDICAL
" BAGUSE FROM SCHOOL	19.NO WORK TH DT	RECT SUMPLOUS
30 7. LIMITED STANDING	TO ANTIBOUT CEMPERATION	E EXTERMEC
30 8. NO WALKING > 800 YARDS	00 21.NO HUMIDITY EX	CTREMES
30 9. NO LIFTING > 025 LBS.	- 22.NO EXPOSURE TO	ENVIRONMENTAL POLL
10.NO BENDING AT WAIST	24 NO WORK WITH (	HEMICALS OR TRRITAL
11.NO SQUATTING 30 12.NO CLIMBING	24.NO WORK REQUITE	ING SAFETY BOOTS
	25.NO WORK AROUND	MACHINES WITH MOV-
13. LIMITED SITTING	26.NO WORK EXPOSI	RE TO LOUD NOISES
14.NO REACHING OVER SHOULDER	27.NO WORK REQUIR	ING COMPLEX INSTRUC
IV. DISCIPITNARY PROCESS (CHECK ONE) X A. NO RESTRICTIONS		
B. CONSHIP DEPRESSION	II Desa	
B. CONSULT REPRESENTATIVE OF MENTAL HEALT C. CONSULT REPRESENTATIVE OF MEDICAL DEPA		KING DISCIPLINARY & USCIPLINARY &
TREATMENT DEAT COLOR		1116 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
X A. NO RESTRICTION	HAT APPI,Y)	
B. MEDICAL REPRESENTATIVE REQUIRED	C. PSYCH REPRESENT	'ATIVE REQUIRED
VI. TRANSPORTATION DEGREE		
VI. TRANSPORTATION RESTRICTIONS (CHECK ONE) X A. NO RESTRICTION		
B. EMS AMBULANCE	C. WHEELCHAIR VAN	
RADDY DADD	n. VAN (SOUTHERN F	EGION ONLY
PRINTED NAME AND TITLE OF PRINTED		· · · · · · · · · · · · · · · · · · ·
PRINTED NAME AND TITLE OF REVIEWER DATE	and the cost of th	
• •	SIGNATURE OF REV	TEWER
HSM-18(REV.07/01)		





JSA8830 /CLM1/HS05

## TEXAS DEPARTMENT OF CRIMINAL JUSTICE HEALTH SUMMARY FOR CLASSIFICATION

30

NAME: MCCOLLUM, LARRY GENE TDCJ#: 01105538 SID#: 03950494	BOB: 04/04/1953	
UNIT: CL HOUSING: J7-044 JOB: JC UTILITY WORK SQUAD 05		1311121111131 
I UNITE OF ACCIONMENT (GIROF ONE)		
I. UNIT OF ASSIGNMENT (CHECK ONE)	e stanten ener	
X A. NO RESTRICTION B. REGIONAL MEDICAL FACILITY	E. BARRIER-FREI	
C. EXTENDED CARE FACILITY	F. SINGLE LEVEL	. FACILITY PEE CAMP ASSIGNMENT?
D. PSYCHIATRIC CARE FACILITY	SUITABLE FOR SAIP	
PSIONIRUNIO DARE PROCEETI	SULIBOUD FOR SALE	FRUENKIKI
II. HOUSING ASSIGNMENT		
A. BASIC HOUSING (CHECK ONE)	B. BUNK ASSIGNMENT	
X 1. NO RESTRICTION	1. NO RESTRICT	ON
2. SINGLE CELL ONLY	00 2. LOWER ONLY	
3. DOUBLE CELL ONLY		/ au = a = a = a = a = a = a = a = a = a
4. SPECIAL HOUSING (HOUSING WITH		
PATIENT WITH LIKE MEDICAL CONDITION		
5. CELL BLOCK ONLY	2. GROUND FLOOR	C ONLY
III.WORK ASSIGNMENT/RESTRICTIONS (CHECK ALL TE	HAT APPLY)	
1. MEDICALLY UNASSIGNED	15.NO FOOD SERV	
2. PSYCHIATRICALLY UNASSIGNED	16.NO REPETITIV	VE USE OF HANDS
3. SEDENTARY WORK ONLY		N WET UNEVEN SURFAC
4. FOUR HOUR WORK RESTRICTION	18.DO NOT ASSIG	
5. FOUR HOUR LIMITED WORK RESTRICTION	19.NO WORK IN I	DIRECT SUNLIGHT
6. EXCUSE FROM SCHOOL	00 20.NO TEMPERATI	IRE EXTREMES
00 7. LIMITED STANDING	00 21, NO HUMIDITY	EXTREMES
00 8. NO WALKING > 800 YARDS		TO ENVIRONMENTAL PO
00 9. NO LIFTING > 025 LBS.		CHEMICALS OR IRRIT
10.NO BENDING AT WAIST		URING SAFETY BOOTS
11.NO SQUATTING		IND MACHINES WITH MOV
00 12.NO CLIMBING		SURE TO LOUD NOISES
13.LIMITED SITTING	27.NO WORK REQU	HRING COMPLEX INSTRI
14.NO REACHING OVER SHOULDER		
IV. DISCIPLINARY PROCESS (CHECK ONE)		
X A. NO RESTRICTIONS		
B. CONSULT REPRESENTATIVE OF MENTAL HEALT		
C. CONSULT REPRESENTATIVE OF MEDICAL DEPA	ARTMENT BEFORE TAKING	DISCIPLINARY ACTION
V. INDIVIDUALIZED TREATMENT PLAN (CHECK ALL T	THAT APPLY)	
X A. NO RESTRICTION	C. PSYCH REPRES	ENTATIVE REQUIRED
B. MEDICAL REPRESENTATIVE REQUIRED		•
VI. TRANSPORTATION RESTRICTIONS (CHECK ONE)		
X A. NO RESTRICTION	C. WHEELCHAIR V	ΔN
B. EMS AMBULANCE	D. VAN (SOUTHER	
	ommune or we was a first of the first	se as 1111 1 1118 - 3,739 71 8 /
BARRY RAFF, MD HEALTH ATH 08/26/2002	model bright other channe analysis cause cashe states cashe channe cashe channe cashe channe cashe channe cashe	1000 class celes color
PRINTED NAME AND TITLE OF REVIEWER DATE APPENDIX 1422	SIGNATURE OF McC	ollum 05738

## Case 4:14-cv-03253 Document 288-28 Filed on 06/17/16 in TXSD Page 17 of 22

4770351362 47703513602

HARRI (MICHALIM LARRY) SEME FIGUR: ())100638 - YIORI (19780494 GRIP (6) - RESLIMBE (RACHROSE JRR (6) OMASSA (RAGERSS)MB	(1808) (1870년(1995) 보면진 280 (188 1897) (1788 <sup>7</sup>	P. G. E. B. E. S.  "STATESTATES"  TETALS (ATALA)  "P
I. JMIT OF ASSIGNMENT (CHECK ONE)  Y P. NO RESTRICTION  B. DYSTONAL MEDICAL FACILITY  C. CATENDED CAME FACILITY  J PSYCOLATRIC CARE FACILITY	L. DARRIER-FED L. S. SINGLE LEVE BOLTABLE FOR SAIR	E FACILLTY . PACILLTY MAR CAMP ASSISMADATOX YES UM FACILITYP ( YES UMB
(1. MOUNTHS ASSISMMENT ). BASIC HOUSTNG (CHECK ONE)  X 1. NO VESTATOTION  2. STUGLE CELL OMLY  3. STUGLE CELL OMLY  4. SPECIAL MOUSTNG (HOUSING CHIR PATTENT WITH LIKE MEDICAL COMDITION  5. CALL MOCK (MAY)	E. AUNK ASSIGNMENT  1. NO RESTRICTI  30 2. LOWER ONLY  C. ROW ASSIGNMENT	(CHECK ONE)  (CHECK ONE)
II. WORK AUGLGAMENT ARESTRICTIONS (CHECK ALL (  1. PEDICALLY OWARSIGNED  00 R. SELENTARY BORK ONLY  00 A FOUR HOUR WORK RESTRICTION  3 FOUR HOUR LIMITED BORK RESTRICTION  6 EXCUSE FROM SCHOOL  60 B. NO VALXING - 200 YARDS  60 P. NO TETLING 1 025 LSS.  10 NO REMOTING AT WAIST  11 NO SQUATTING  20 IS NO FLIMING  12 NO FERRING  13 NO FERRING  14 NO FERRING  15 LIMITED SITTING  14 NO FERRING	HAT APPLY) 15.90 FOOD DEXT16.00 REPETITIVE 00 17.00 WALK 46 DE18.00 FOOT ASSIGN	ICE E USE OF HAMOS N SKT UNEVEN BURFACES N TO MEDICAL
. CORLEGATOR OF PROCESS OF MEDICAL ONE)  X. A. AU RESTRICTIONS  L. S. CONSULT REPRESENTATIVE OF MEDICAL GEAL  C. CONSULT REPRESENTATIVE OF MEDICAL GEAR	H DEPAKTMENT PERGOR T. KTMENT DERORE TAKTRO J	
TANGENT DEAE ELS TETREMENTERE PLANE CONFOX ACL IN F. M. MO MESTALOTRON LL S. MODIGAL SEPREMENTATIVE RESUGNER	MAT AZPLY) LL. C. PEYCH KEZRESEA	TARIVE RESULED
- (RA-PERTURIAL COM RESTRICTIONS (INSECTORE) - R. MO RESTRICTION _ G. THE ANNUARDE	L. S. MARTELLA, S. SAN	
RESERVING OF THE SECOND OF THE	Martin St. Carlottinia	The production

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教育的に   MCCCは上月数。と音を名子   心と成形	108: 04/04/1953	<b>是并有有</b> 多	
DAGE: MCCGLEMS, LARRY GEME (1965): 01105538   SID\$: 03950494 UMIT. MJ   EDUSING: K46-0058 203: UC GMASGN PROCESSING	967: 01001	1311:011:111 1814:84:4141 1814:84:4141	
i. UNIT OF ASSIBNMENT (CMECK ONE)  X A. MO RESTRICTION  B. REDIONAL MODICAL FACILITY  C. EXTENDED DARK FACILITY  D. PSYCHIATRIC CARE FACILITY	a Shabaria mash	E FACILITY L PACTLITY TEE CHEP ASSIBNO MYRY YES NO FACILITYR X YES NO	
II. HOUSING ASSIGNMENT  A. BASIC MOUSING (CHECK ONE)  X 1. NO RESTRICTION  2. SINGLE CELL ONLY  3. DOUBLE CELL GNLY  4. SPECIAL MOUSING (MOUSING WITH  PATIENT WITH LIKE MEDICAL CONDITION  5. CELL BLOCK TREY	3. SOME ASSISMMENT 1. NO RESTRICT. 00 2. LOUER ONLY	T (CHECK DNE) TON	
II.WORK ABSIGNMENT/RESTRICTIONS (CHECK ALL )  1. MEDICALLY UNASSIGNED  2. PSYCHIATRICALLY UNASSIGNED  3. SEDENTARY WORK COMEY  4. FOUR SOUR LIMITED WORK RESTRICTION  5. FOUR MOUR LIMITED WORK RESTRICTION  6. EXCUSE FROM SCHOOL  7. LIMITED STAMPLAS  8. NO WALVING > 800 TARBS  90 F. NO LIFTING > 625 LBS.  10.NO BENDING AT WAIST  11.NO SQUALLING  10.LIMITED SITTING  13.LIMITED SITTING  14.NO YEACHING OVER SHOULDER			
DISCIPITIONS     A. NO RESTRICTIONS     B. CONSULT REPPESENTATIVE OF MEMIAL DEAL     C. CONSULT REPRESENTATIVE OF MEMIAL DEPI  THULVINGALIZED TREATMENT PLAN (CALCE ALL '     A. NO RESTRICTION     B. MEDICAL REPRESENTATIVE REQUIRED  (RANSPORTATION RESTRICTIONS (CHECK GOE)	ARTHENT BEFORE TAKING	DISCIPLINARY ACTION	
X A. PARESTRACTION  S. TAS PARESTRACT  PROFES TABLEMENT  ACCORDANCE  ACCORDAN	C = GREET CAN IN VI D = JAM = CROMINE M		
THE STATE OF THE STATE OF SEVERAL CASE.	5 - 인물을 필요한 그렇게 3		

## NURSING ASSESSMENT PROTOCOL FOR MUSCULOSKELETAL SYMPTOMS

щ	of Assignment: Colc	_Work Assi	ignment:_		HOC.	
en	MCCollum Larry TDCJ# of Assignment: Colc It Medications: Naproxam / Zatase / Ha	edol /	Bundryl	/ Huoxi	from.	
gi	es: (Food, drug, other)					
_						
a	l items that are appropriate and/or complete all blanks.					
	1 i i i					
E	CTIVE DATA					
	Significant medical history: PML CLBP.	2			7	0 1 1
	Significant medical history.	3.	Moveme	nt: Norm	ar	Guarded
	Pain: Book, Knee, Shookder-	4.	Posture:	Norm	al Erect	Guarded
	Location Onset				o right	Tilts to left
	Frequency Duration			Sitse	asily	Sits w/diffici
	Radiation Where:					
	Intensity: Mild Moderate Severe	-5-	Gait:	Norm	al Limp	Guarded
	Precipitating factors: working clabbon.	6	Periphera	al Pulses: $\sim l$	4	
		_			Right	Left
	^			Radial	Present	Prese
	Recent trauma? Y				Absent	Abser
	Surgery?			Dorsalis Pedis	Present	Prese
	Strenuous Physical Activity? (N) Y				Absent	Abser
	$\sim$	7	D:	11/4		
	History similar problem?	7		UA: NA	3.11	4*4
				Leukocytes		
	What was done then?			Urobilinogen _		
						lood etones
						ucose
	History of arthritis? (N) Y			Difficulti	0,	ucose
		Comm	ents: Offen	ules st	ale "	still home
	Family history: No.	He		· m-61	in the	f = 40
		who		had a	estruction :	**
C	TIVE DATA WL. 233					
	T 96 - P 46 R 20 B/P 13 1/25	NURS	ING ACTI	ON:		
	Joints: Normal Stiffness Redness			collection of the		
	Hot Swelling			ent is required		
	Range of Motion: Affected Joint(s)			must consult w		
	Full Limited Absent	patient	is still on si	te. Otherwise,	proceed with	protocol.
	Right Leg					
	Left Leg	Refer to	-	Midlevel Practi		
	Right Arm	<b>&gt;</b>	Acute ons	set with loss of a	notion or fun	ction.
	Left Arm					
	Neck	<b>&gt;</b>		walking, n		
	Back:			ying abdominal j		
	Anteflexion		or bloody	urine, temperat	ure greater 10	01°F.
	Dorsiflexion 1					
	Dorsiflexion	•	Suspected	fracture.		

HSN-17 (rev. 10/98) Front

## CLINIC NOTES

Collum farm TEXAS DEPARTMENT OF CRIMINAL JUSTICE INSTITUTIONAL DIVISION

ouit: ——			
Date & Time	Notes		
512-03	10745/HSA9/ rictoday/ res	trictions have	
	been lifted for some	reasons -	
Commission of the Commission of the Adult of the Commission of the	You do not have n	o restrictions	
		Jenews RM	
5-14-03			
-11-03 a	1-60 Rocd 5/14/03 requesti	piring Chart	
0 30 (1)	1. In some also	- I Vish III on Rh	
116/03/0	pain, and Check in my seo. I dudyle usc 5-17-03 1	see fre Should	
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	I dudule NSC 5-17-03 1	Watdran	
5/16/03			
<del></del>	i) This restitutions how her	clube and are	
	exactly as or del (is no	<b>\</b>	
	2) He he me Ry (mede) up		
P		BARRY RAFF MD	
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5/16/03	186 noted - annuller.	C. THM	
		V \	
***************************************		•	
Please sign ea	ach entry with status. APPENDIX 1426	McCollum 05784	

HQM \_ 1 /Day 5/091

# **CLINIC NOTES**

TEXAS DEPARTMENT OF CRIMINAL JUSTICE INSTITUTIONAL DIVISION

TDCJ No.: 1105538 1 Unit:	
Date & Time	Notes
3/11/03 JISAG ROCA 3/11/03	: 40 cracks on feat
3/2/03 Change HSM-18, Co	3/12/03 - DPhillipper
1415	BILLY D. BURLESON, PSY. D. PSY.
312/03 Motor	DPhrough
3/12/03/1600/ Albridge	1 Joaks BAD & Mdarp.
lea fort. To	Rap mo / Dwatking 2
Sign	AM 31/19/105 11W
3/12/03/ 2608) note &	7. 1899529 Wathins LVN
3/14103 Oht Row C	
last nee y us 1/2	1/03
hat had LIFTING WI	3 <del>2/2</del> 3/6/03,
111 By A good indines	Juny LBP
<u> </u>	1, W7, BARRY RAFF MO
The state of the s	9 · 50 15
	pm PM
3-1403/1216/ note	a Afrancha g

J0174

## UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION

STEPHEN MCCOLLUM, et al.,	§	
Plaintiffs,	§	
	§	
<b>v.</b>	§	<b>CIVIL NO. 4:14-CV-3253</b>
	§	
	<b>§</b>	
BRAD LIVINGSTON, et al.,	§	
Defendants.	§	
	§	

## Exhibit 47